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## BIB DATA SHEET

CONFIRMATION NO. 5752

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.		
10/579,829	05/17/2006	514	4121	00005.001293.		
<b>RULE</b>						
<b>APPLICANTS</b> Hiroshi Kase, Tokyo, JAPAN; Yutaka Nakagawa, Kanagawa, JAPAN; Shizuo Shiozaki, Fuji-shi, JAPAN; Minoru Kobayashi, Sunto-gun, JAPAN; Shinichiro Toki, Sunto-gun, JAPAN; Naoki Seno, Moriya-shi, JAPAN; Ken Ikeda, Shizuoka, JAPAN;						
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/JP04/18765 12/09/2004						
<b>** FOREIGN APPLICATIONS *****</b> JAPAN 2003-410432 12/09/2003						
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 12/23/2006						
Foreign Priority claimed 35 USC 119(a-d) conditions met Verified and Acknowledged	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No /SARAH PIHONAK/ Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> JAPAN	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 14	<b>INDEPENDENT CLAIMS</b> 2
<b>ADDRESS</b> FITZPATRICK CELLA HARPER & SCINTO 30 ROCKEFELLER PLAZA NEW YORK, NY 10112 UNITED STATES						
<b>TITLE</b> Agents for preventing and/or treating higher brain dysfunctions						
<b>FILING FEE RECEIVED</b> 1560	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		